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PTO/SB/01 (12-97)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	I-2-91.10US
	First Named Inventor	Ozluturk et al.
	COMPLETE IF KNOWN	
	Application Number	09/742,579
	Filing Date	December 21, 2000
	Group Art Unit	2631
Examiner Name	Not Yet Known	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CODE DIVISION MULTIPLE ACCESS (CDMA) COMMUNICATION SYSTEM

The specification of which *(Title of the Invention)*

☐ Is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **12/21/2000** as United States Application Number or PCT International Application Number **09/742,579** and was amended on (MM/DD/YYYY) **(if applicable)**.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

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[Page 1 of 2]

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08/669,775	06/27/1996	5,799,010
60/000,775	06/30/1995	
09/003,104	01/06/1998	6,181,949
08/670,162	05/27/1996	5,941,768
09/304,286	05/03/1999	
08/671,068	06/27/1996	5,940,392

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☒ Customer Number

24374

OR

☐ Registered practitioner(s) name/registration number listed below

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Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C. and InterDigital Communications Corporation			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number
or Bar Code Label

24374

OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

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Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Fatih M.	Ozluturk

Inventor's Signature	Date
Residence: City	State
Port Washington	NY
Country	USA
Citizenship	TR
Post Office Address	
70 Willowdale Avenue	
Post Office Address	
City	State
Port Washington	NY
ZIP	11050
Country	USA

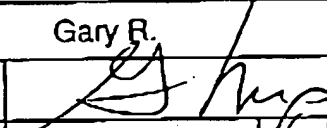
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
--------------------	--

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Gary R.				Lomp			
Inventor's Signature				Date	5/23/61		
Residence: City	Centerport	State	NY	Country	USA	Citizenship	US
Post Office Address	130 Washington Drive						
Post Office Address							
City	Centerport	State	NY	ZIP	11721	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
John				Kowalski			
Inventor's Signature				Date			
Residence: City	Vancouver	State	WA	Country	USA	Citizenship	US
Post Office Address	1905 S. E. 179th Court						
Post Office Address							
City	Vancouver	State	WA	ZIP	98683	Country	USA
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Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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09/304,286	05/03/1999	
08/571,058	05/27/1996	5,940,382

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number **24374** → Place Customer Number Bar Code Label here

☐ OR Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C. and InterDigital Communications Corporation			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number **24374** OR ☐ Correspondence address below

Name			
Address			
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City	State	ZIP	
Country	Telephone	Fax	

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Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle if any)		Family Name or Surname	
Fatih M.		Ozluturk	
Inventor's Signature	<i>Fatih M. Ozluturk</i>		Date
Residence: City	Port Washington	State	NY
		Country	USA
Post Office Address	70 Willowdale Avenue		
Post Office Address			
City	Port Washington	State	NY
		ZIP	11050
		Country	USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

PTO/SB/02A (3-97)

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DECLARATION

ADDITIONAL INVENTOR(S).
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Gary R.		Lomp					
Inventor's Signature						Date	
Residence: City	Centerport	State	NY	Country	USA	Citizenship	US
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Post Office Address							
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
John		Kowalski					
Inventor's Signature						Date	
Residence: City	Hempstead	State	NY	Country	USA	Citizenship	US
Post Office Address	65 Hilbert Street						
Post Office Address							
City	Hempstead	State	NY	ZIP	11550	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applications:

[illegible]

Additional provisional applications:

Application Number	Filing Date (MM/DD/YYYY)

Additional U.S. applications:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/354,042		07/15/1999	
08/671,067		06/27/1996	5,953,346
09/129,850		08/06/1998	
08/670,160		06/27/1996	
09/079,600		05/15/1998	
08/671,221		06/27/1996	5,754,803

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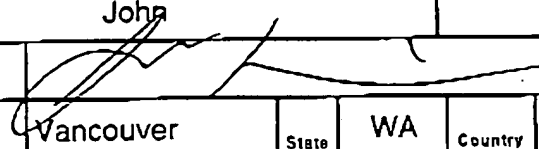
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Supplemental Sheet

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John				Kowalski			
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